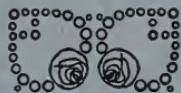


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CHEADLE
RURAL DISTRICT COUNCIL.



Annual Report

OF THE

MEDICAL OFFICER OF HEALTH.



1925.

J. LOWNDES, PRINTER, CHEADLE.

TO CHEADLE RURAL DISTRICT COUNCIL.

Mr. Chairman. Ladies and Gentlemen,

I have pleasure in presenting my report for the year ending 31st December 1925, which as directed by the Minister of Health takes the form of a "Survey report" and deals comprehensively with the progress made in the sanitation of the district during the preceding five years.

In reviewing the extent and character of the changes made during that period, the most outstanding feature is perhaps the vast improvement that has been carried out in the water supply of various parts of the District. Cheddleton, Werrington, Wetley Rocks, Alton, Bradley, Tean, and other hamlets in these areas,—all of which for the most part depended previously on wells for their water supply,—have now an excellent and abundant, constant supply of water from springs at Wall Myers, Ramsor and Teanford; and although the sum of money expended in completing the schemes for the water supply of these villages is a large one the justification is in the improvement in health that is bound to be felt and appreciated by all who receive water from these sources.

Several important advances in the disposal of Sewage have been made during the period under review. At Weston Coyney a complete new sewage disposal works has been constructed, and another of similar type has been built at Froghall—this latter dealing with the sewage from Kingsley Holt. A small new sewer and outfall works has been constructed at Wetley Rocks, and at Cheddleton, while many minor improvements have been made to existing sewage schemes in various parts of the district. In Cheadle town the disposal of sewage has been improved by the utilisation of a larger area of land, but there is room for further improvement and with this end in view land that will be suitable for the erection of sewage disposal works at a future date has been acquired.

The scavenging of the district has been greatly improved during the last five years, and a reference to the appendix will indicate the large amount of work that is done by this department.

The Housing question is still a serious one, and although the local authority is, by the granting of subsidies, doing all in its power to encourage the building of houses suitable for the working people, there is still a large amount of overcrowding, and many existing houses are not reasonably fit for human habitation.

When these difficulties are overcome, and the economic conditions improve, the facilities that are now provided for

greater cleanliness of the home and its immediate environment will surely tend to bring about a great improvement in the public health throughout the whole of the district.

I am, Mr. Chairman, Ladies and Gentlemen,
Your obedient servant,

CHEADLE,
APRIL, 1926.

D. M. WILSON.

Extracts from Vital Statistics.

BIRTHS :—Legitimate : Total, 492 (Male 237, Female 255); Illegitimate : Total 20 (Male 10, Female 10); Birth Rate 19·3

DEATHS :—Total 271 (Male 130, Female 141); Death Rate 10·2.

Number of women dying in, or in consequence of, Child-birth : from Sepsis 1; from other causes, nil.

Deaths of infants under 1 year of age per 1000 births : Legitimate 70·3; Illegitimate 9·7

Deaths from Measles (all ages) 6.

Deaths from Whooping Cough (all ages) 6.

Deaths from Diarrhoea (under 2 years of age) 6.

General Statistics.

Area (acres)	...	...	...	54,258
			1921	1925

Population (census 1921, and estimated 1925). 28,730. 26,430.

Physical features and general character of the area. Hill and Dale chiefly Woodland and Agricultural.

Number of inhabited houses (1921). ... 5,886

Number of families or separate occupiers (1921). ... 6,004

Rateable Value £131,325/17/7

Sum represented by a penny rate ... £438

Natural and Social Conditions of the District.

The area of the district (including land and inland water) is 54,258 acres, the greater part consisting of agricultural land and woodland, though much of the latter has been laid bare during the last few years.

In the northern part of the district the ordnance map levels vary from 750 ft. to 1000 ft. above O.D.; in the Western area (N. to S.) the variations are 750 ft.—850 ft.—650 ft.—600 ft.; in the Southern area (W. to E.) 500 ft.—700 ft.; in the North-eastern area 800 ft.—1,100 ft.; and in the South-eastern area the ordnance map level is 600 ft. O.D.

The highest level is reached near Foxt Reservoir, 1,244 ft. O.D., and the lowest level on the Tean—Uttoxeter Road, 414 ft. O.D.

These figures give some indication of the nature of the district, which is chiefly comprised of hills and valleys, with numerous small streams and brooks, and one small river, "The Churnet," running through it.

The inhabitants of the district are comprised chiefly of the "working class," there being only a very small number of residential houses throughout the whole area.

The principal industry is coal mining—at Cheadle, Dilhorne, and to a small extent at Froghall. Silk mills at Cheadle and Tean give employment to a large number of women. Brass and copper works at Froghall and Oakamoor give employment to upwards of 1,500 men, and a few are employed at brickmaking at Cheadle. At Cheddleton an increasing number of the inhabitants are finding employment in a large and up-to-date paper mill, while stone quarrying is an important industry at Cauldon Lowe and at Hollington, and throughout the district an increasing number are employed in agriculture.

There is no great prevalence of industrial diseases. A few cases of Nystagmus and other eye troubles occur annually amongst the coal miners, but the district is markedly free from these diseases, and it is to be noted that anaemia is much less prevalent amongst those working in the mills, probably on account of the improved sanitation and the tendency of the workers to spend much more of their time in the open air.

FACTORIES AND WORKSHOPS.

The number of Factories and Workshops on the register is 116. The Workshops are comprised generally as follows:—Boot and shoe makers, bakers and confectioners, joiners, smiths, wheelwrights, painters and plumbers, motor repairers, dressmakers and milliners.

During the year 102 visits were made—32 to Factories, and 70 to workshops. In no instance has any serious nuisance been found arising from employment in these places, but in two where there was insufficient sanitary accommodation this condition has now been remedied.

BIRTHS AND DEATHS.

The numbers of Births and Deaths are those registered during the calendar year and are corrected for inward and outward transfers. The population has been estimated by the registrar-general as at 30th June, 1925, and is based on the adjusted 1921 figures after allowance for the varying rates of natural increase, as evidenced by the births and deaths in each area, and of migration, as indicated from other sources of information, such as changes in the numbers on the electoral register and the migration returns obtained by the Board of Trade.

1. Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or
Inspectors of Nuisances.

Premises (1)	Number of		
	Inspections (2)	Written Notices (3)	Occupiers Prosecuted (4)
FACTORIES (Including Factory Laundries)	32	2	
WORKSHOPS (Includ Workshop Laundries)	70	nil	
WORKPLACES (Other than Outworkers' Premises)			
Total ...	102	2	nil

2. Defects found in Factories, Workshops and Workplaces

Particulars (1)	Number of Defects			Number of offences in respect to which prosecutions were instituted (5)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness				
Want of ventilation				
Overcrowding				
Want of drainage of floors... ...				
Other nuisances				
Sanitary accommodation	insufficient unsuitable or defective not separate for sexes	2	2	nil
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of underground bakehouse (s. 101)				
Other offences (Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total ...	...	2	2	nil
				nil

Causes of Death (Civilians only).				M.	F.	Causes of Death.		M.	F.
All Causes ...	...	...	...	130	141	23	Appendicitis and typhlitis ...		
1 Enteric Fever	...	...				24	Cirrhosis of liver ...		
2 Small pox	...	...				25	Acute and chronic nephritis...	1	3
3 Measles	...	...		3	3	26	Puerperal sepsis ...		1
4 Scarlet Fever	...	...		1		27	Other accidents and diseases of pregnancy & parturition...		
5 Whooping Cough	...	...		3	3	28	Congenital debility and malformation, premature birth...	10	5
6 Diphtheria	...	...			1	29	Suicide ...	4	
7 Influenza	...	...		8	6	30	Other deaths from violence ...	6	2
8 Encephalitis lethargica	...	...			1	31	Other defined diseases ...	20	26
9 Meningococcal meningitis	...	...		1		32	Causes ill-defined or unknown	3	
10 Tuberculosis of respiratory system	...	...		7	2	Special causes (included above)			
11 Other tuberculous diseases	...	...		4	2	Poliomyelitis ...			
12 Cancer, malignant disease	...	...		8	17	Polioencephalitis ...			
13 Rheumatic Fever	...	...		2	1	Deaths of Infants under 1 year			
14 Diabetes	...	...			1	Total ...			
15 Cerebral haemorrhage, &c.	...	...		5	8	Illegitimate ...			
16 Heart disease	...	...		22	27	Total Births ...			
17 Arterio-sclerosis	...	...		11	4	Legitimate ...			
18 Bronchitis	...	...		3	12	Illegitimate ...			
19 Pneumonia (all forms)	...	...		5	11	Population ...			
20 Other respiratory diseases	...	...			1	26,430			
21 Ulcer of stomach or duodenum	...	...			1				
22 Diarrhoea, &c. (under 2 years)	...	...		3	3				

Births.

The total number of Births registered during the year was 512, including 247 males and 265 females. Calculated on a mid-yearly population of 26,430, this gives a birth-rate of 19·3, considerably lower than that of the preceding years.

Deaths.

The total number of Deaths registered during the year was 271, including 130 males and 141 females. This gives an annual death-rate of 10·2, slightly greater than that of the preceding year.

The total number of deaths registered of Children under 12 months of age was 41, including 24 males and 17 females, and gives an infant mortality rate of 80 per 1000 births.

Amount of Poor Law Relief.

Cost of Indoor Maintenance for year : £2581/11/3.

Average number of Persons receiving indoor relief : 93.

Cost of Outdoor Maintenance for year : Out Relief, £3120/8/7½.

Non-settled Poor, £189/15/2.

Average number of persons receiving outdoor relief : 272.

TABLE X.

Birth-rate, Death-rate and Analysis of Mortality during the Year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

	Birth-rate per 1000 of total population	Annual Death-rate per 1,000 population						Rate per 1,000 births	Percentage of total deaths						
		All causes	Enteric fever	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria							
England and Wales ...	18·3	12·2	0·01	0·00	0·13	0·03	0·15	0·07	0·32	0·47	8·4	75	92·1	6·9	1·0
105 County Boroughs and g't towns, including London	18·8	12·2	0·01	0·00	0·17	0·03	0·18	0·09	0·30	0·43	10·8	79	92·1	7·3	0·6
157 Smaller Towns, (1921 adjusted populations 20,000-50,000) London...	18·3	11·2	0·01	0·00	0·15	0·02	0·14	0·06	0·31	0·38	7·6	74	93·0	5·9	1·1
Cheadle Rural District	19·3	10·2	0·00	0·00	0·22	0·03	0·22	0·03	0·52	0·30	11·7	80	93·1	5·0	1·8
Cheadle, 1924...	21·9	10·0	0·00	0·00	0·04	0·00	0·07	0·04	0·26	0·26	3·4	88	93·2	5·6	1·1
Cheadle, 1923...	20·2	10·1	0·00	0·00	0·07	0·03	0·00	0·19	0·34	0·28	11·3	90·5	94·4	5·1	0·3
Cheadle, 1922...	21·4	10·0	0·00	0·00	0·00	0·15	0·26	0·52	0·26	10·5	65	96·2	3·1	0·7	
Cheadle, 1921...	22·6	11·03	0·06	0·00	0·03	0·06	0·34	0·24	7·6	66	98·7		1·0	0·3	

Cost of Maintaining Boarded-out Children : £226/1/4.

Average number of children boarded out : 10.

Cost of Maintaining Children in Cripples' Home : £303.

Subscription to North Staffs. Royal Infirmary : £10/10s.

Subscription to Buxton Hospital : £2/2s.

WATER SUPPLY.

Cheadle town and its immediate surroundings are supplied with good and wholesome water by the Cheadle Waterworks Company. The water, after filtration through the red sandstone formation, is pumped from a deep well to a reservoir, and thence distributed in iron mains. This is now a continuous supply, except for a few hours on Thursday afternoons, when cleaning operations are in progress at the reservoir.

The villages of Weston Coyney, Caverswall, Blythe Bridge and Forsbrook receive an adequate supply of water from the neighbouring City. Dilhorne, Godley Brook and district are supplied with water through two miles of cast iron mains, from springs near Stansmoor. Oakamoor is supplied from springs in the surrounding woods, the water being brought to the village through mains to standpipes. Kingsley, Froghall and Kingsley Holt are supplied from springs at Shirley Hollow, between the villages of Ipstones and Foxt. The water is brought from these springs to a reservoir close to Kingsley village, from whence it is distributed through cast iron mains. Owing to bursts, and probably, to some extent, to the main being tapped to supply a large number of houses before it reaches the reservoir, there have on many occasions been serious shortages of water in the village, and at the present time the houses in the higher parts and more outlying districts are very inadequately supplied with water for drinking and domestic purposes.

The villages of Ipstones and Foxt are adequately supplied with water from springs at Ipstones Park.

Waterhouses and Cauldon Lowe obtain their water supply from the L.M.S. Railway Company's reservoir, the supply being wholesome, adequate and constant.

Whiston now receives an abundant supply of good and wholesome water from springs in that neighbourhood, and as this is much greater than is necessary for the needs of that village, it might well be used to supplement the supply of Kingsley and district.

The water scheme for supplying Cheddleton, Wetley Rocks, Werrington etc., has now been completed, and these villages have a plentiful supply of good and wholesome water distributed through cast iron mains from springs at Wall-Myers.

The Tean Water scheme has also been completed and the village of Tean and surrounding district has now an adequate supply distributed through cast-iron mains from a reservoir in the neighbourhood to which water is pumped from springs at Teanford.

Alton village and neighbourhood is supplied by gravitation from springs at Ramsor from which water is collected in a reservoir and thence led to the village and distributed through cast-iron mains.

In the village of Hollington there has been no improvement made in the water supply which is derived mainly from two wells. The question of extending the Tean scheme to supply this village and the hamlet of Freehay has been seriously considered by the local authority but so far the cost of such an extension has been found to be prohibitive.

Drainage and Sewerage.

The efficient drainage and sewerage of a rural district present many difficulties, and although there is room for much improvement in Cheadle district many important additions to existing sewers have been carried out in various of the villages. The local authority has adopted the policy, in adding to existing sewers and drains and in laying new sewers, of constructing these in such a manner as will enable them to be utilised as part of a complete scheme. By this means comprehensive schemes are gradually being carried out and existing nuisances abated, and in time most of the villages will be adequately sewered and drained. In addition modern sewage and outfall works have been constructed at Weston Coyney and at Froghall, while at Cheadle and in the villages of Cheddleton and Wetley Rocks land has been acquired for this purpose. There are however still certain villages very badly in need of improved sewerage and drainage—noteably Kingsley, Alton, Tean, Ipstones, Dilhorne and Alton, and in Cheadle there are still some areas unsewered. For these reasons some pollution of brooks and streams running through or past these villages is to be noted, and so marked is this nuisance at Kingsley that a new sewage scheme and outfall works for that village is in preparation.

Scavenging.

The scavenging of Cheadle town is carried out by the Council's own teams and workmen, an arrangement that has proved entirely satisfactory.

In the villages of Blythe Bridge, Forsbrook, Dilhorne, Caverswall, Werrington, Cheddleton, Wetley Rocks, Kingsley, Ipstones, Foxt, Oakamoor, Hollington and Tean the scavenging

is contracted for, the arrangements being left to the Parish Council, acting for this purpose as a sub-committee of the District Council, and although an arrangement of this sort must depend for its success or otherwise, to a great extent on the individual contractor, very few complaints of inattention are received.

There are still two villages in which adequate arrangements for scavenging have not yet been made, the disposal of night-soil and household refuse being left to the villagers themselves, and in many instances very objectionable nuisances have arisen from this source.

Number of night soil removals by scavengers for 1925... 69,382
 Number of refuse and ashes removals by scavengers for
 1925 78,053

Closet Accommodation.

Throughout the whole district Ashpits and Privy closets are being gradually abolished. Whenever a nuisance arises from these sources, ashbins are installed to replace the former and W.C.'s or Pail closets to replace the latter. A reference to the appendix will give an indication of the changes that have taken place in this direction during the year 1925.

Estimated number of dwelling houses using water closets	1,007
", ", ", moveable pails	1,760
", ", ", earth closets or	
Privies with fixed receptacles 	3,002
Estimated number of dwelling houses using covered ashbins 	2,205
Estimated number of dwelling houses using open ashpits	1,802
", ", ", covered ashpits	1,762

SCHOOLS.

There are 28 Elementary schools in the district, most of which have been much improved during recent years. The R.C. school, Cheadle, has had new lighting and heating apparatus installed and new modern cloak rooms added so that it can now be regarded as a comparatively modern school.

Cheadle Council school has had a large class room added to it.

Ipstones school has had new closet accommodation provided and is much better drained than formerly, and Foxt school has had several sanitary improvements carried out. In many of the others minor improvements have been made, though little attention has been paid to the provision of adequate cloakroom accomodation and facilities for drying clothes and boots. This is a matter deserving the serious consideration of the school

authorities, as in a rural district with a scattered population, many of the children have to walk several miles to school, and it is very essential that adequate provision should be made for changing and drying their clothes when necessary. Several schools that were previously without an adequate supply of drinking water are now well supplied owing to the several water schemes that have been carried out by the local authority, but in this respect the schools at Hollington and Freehay are still defective, while the water has not yet been laid on to the schools in the village of Tean.

During the year several schools or departments of schools have been closed for short periods owing to outbreaks of infectious disease amongst the scholars, but this measure has seldom provided a check to the outbreak. Even in a rural district school closure,—except in the very sparsely populated areas—does not appear to have any very definite effect in preventing the spread of disease, no doubt because of the difficulty in keeping the children from congregating in other places. There is however greater prospect of epidemics affecting school children being checked by individual exclusion from school owing to the promptitude with which head teachers now report children suspected to be suffering from infectious disease to the M.O.H.

HOUSING.

The estimated number of houses in the district is 5769 of which the great majority are of the "working class" type. It will be observed that the estimated number of houses for the year 1925 is less than the number given for the year 1921, and also that the population of the district estimated for 1925 is still markedly less than it was in 1921. This is due chiefly to the altered area of the district brought about by the extension of the then County Borough of Stoke-on-Trent, the number of acres taken over by the County Borough being 1,260, with an estimated population of 3,834, the number of houses being 767, while there was added to the Cheadle Rural District an area of 1,346 acres with an estimated population of 545, the number of houses added being 109. It is therefore to be observed that though the population of the district is less now than it was in 1921, it does continue to increase gradually—from 25,163 in 1922 to 26,430 in 1925. This is a normal rate of increase, due chiefly to the excess of Births over Deaths. There has been no influx of people to the district during these years nor is there any reason to anticipate an abnormal increase or decrease in the population during the next few years. Although the general standard of the houses throughout the district has improved, due chiefly to the energy displayed by your inspectors—note the

comparatively large number of improvements carried out through informal action on their part,—there are still many that are structurally defective, damp, lacking in proper sanitary conveniences, and poorly ventilated.

Apart from structural defects there are still many houses overcrowded, many have more than one family living in them though not adapted for this purpose, and a much larger number than is given in the statistics are unfit for human habitation. It is not possible to give definite figures for these as your staff with its multitude of other duties is quite unable to make a complete survey of the district in 12 months. It is however intended that some of the very bad cases should be dealt with and already several representations with a view to the making of closing orders have been made, other defective dwellings being dealt with by requiring owners to carry out such alterations and repairs as will render the houses reasonably fit for human occupation. Below are given details of the Housing statistics for the Year and details of other sanitary matters.

Housing Statistics for the Year 1925.

- (A) Total [including numbers given under (b)]—108.
- (B) With State Assistance under the Housing Acts :
 - (i) By Local Authority—nil.
 - (ii) By other bodies or persons—48.

I. UNFIT DWELLING-HOUSES.

INSPECTION.

(A) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts) ...	924
(B) Number of houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	102
(c) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	12
(d) Number of dwelling-houses (exclusive of those referred to in the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ...	77

II. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	174
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Maternity and Infant Welfare.

Particulars relating to the Work during the Year 1925.

Births										Transfers from other Districts during the Month.							
Notified																	
Live Births					Stillborn					By Parents and Doctors			Under ten days				
Full term	Premature	Full term	Premature	Stillborn	Full term	Premature	Full term	Premature	Stillborn	L.	I.	L.	L.	I.	L.		
L.	I.	L.	I.	L.	I.	I.	L.	I.	L.	L.	I.	L.	I.	L.	I.		
407	11	2	0	15	0	11	0	343	12	59	0	0	1	29	2	49	0

First Visits			Revisits			Total Visits			Children on Visiting List at		
1	2	3	4	5	6	7	8	9	10	11	12

Welfare Centre		Health Visitor		Total No. of Visits	
Expectant Mothers	Under 1 year	Expectant Mothers	Betw'n 1 & 5 years	Expectant Mothers	Under 1 year
255	124	43	392	3847	5772
				647	4271

Deaths, Transfers and Removals of Children on Visiting List during the Year		Welfare Centre		Total No. of Attendances		No. of cases of insanitary conditions reported to Medical Officer of Health	
Under ten days	Over 10 days and under one year	Transferred to School	Children	Expectant Mothers	Children	Health Visitor	
Deaths	Removals	Deaths	Under 1 year	Betw'n 1 & 5 years	Under 1 year	Betw'n 1 & 5 years	
L. I.	L. I.	L. I.	L. I.	L. I.	L. I.	L. I.	
3 | 1 | 0 | 0 | 11 | 1 | 30 | 2 | 7 | 0 | 78 | 0 | 208 | 2 | 31 | 56 | 19 | 604 | 1055 | 50 | 32							

III. ACTION UNDER STATUTORY POWERS.

(A) Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919.			
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	...	...	2
(2) Number of dwelling-houses that were rendered fit after service of formal notices :			
(a) by owners	...	...	2
(b) by Local Authority	...	...	nil
(3) Number of dwelling-houses in respect of which closing orders became operative in pursuance of declarations by owners of intention to close	...	...	nil
(B) Proceedings under the Public Health Acts.			
(1) Number of dwelling-houses in respect of which notices—formal or informal—were served requiring defects to be remedied	...	...	279
(2) Number of dwelling-houses in respect of which defects were remedied after service of formal notices :			
(a) by owners	...	...	32
(b) by Local Authority in default of owners	...	...	nil
(C) Proceedings under Section 17 and 18 of the Housing, Town Planning Act, 1909.			
(1) Number of representations made with a view to the making of closing orders	...	...	nil
(2) Number of dwelling-houses in respect of which closing orders were made	...	...	nil
(3) Number of dwelling-houses in respect of which closing orders were determined,—the dwelling-houses having been rendered fit	...	...	nil
(4) Number of dwelling-houses in respect of which demolition orders were made	...	...	nil
(5) Number of dwelling-houses demolished in pursuance of demolition orders	...	...	nil
(D) Visits.			
(1) Number of visits made under the Public Health and Housing Acts	...	...	2920
(2) Number of visits made to new buildings...	...	...	133
(3) " " " drains and sewers	...	...	107
(4) " " " dairies, cowsheds and milk-shops...	...	...	103
(5) Number of visits made to bakehouses	...	...	30
(6) " " " re water supply...	...	...	283
(7) " " " petrol and carbide of calcium (licenses)	...	...	83

(8) Number of visits made to workshops ...	...	66
(9) " " " slaughter houses and shops (inspection of meat) ...	...	235
(10) Number of visits made re offensive trades ...	...	4
(E) Summary of defects remedied.		
(1) Number of privies and earth closets converted to water-closets ...	...	4
(2) Number of earth closets converted to moveable pail privies ..	...	72
(3) Number of new covered ashbins to replace defective ones ...	...	49
(4) Number of new covered ashbins to replace abolished ashpits ...	...	96
(5) Number of new privy pails to replace defective ones...	...	17
(6) " " defective drains repaired ...	...	51
(7) " " new drains provided to premises previously without drains ...	...	19
(8) Number of offensive accumulations removed ...	...	23
(9) " " additional closets provided ...	...	11
(10) " " water closets repaired ...	...	8
(11) " " cowsheds or dairies altered after notice ...	...	13
(12) " " " " cleansed "	...	38
(13) " " " " nuisances abated arising from the improper keeping of pigs ...	...	4
(14) Number of slaughter houses altered after notice ...	...	12
(15) " " informal notices served under Public Health and Housing Acts ...	...	154
(16) Number of statutory notices served under Public Health and Housing Acts ...	...	44
(17) Number of informal notices complied with under Public Health and Housing Acts ...	...	100
(18) Number of statutory notices complied with under Public Health and Housing Acts ...	...	29
(19) Number of scavenger's notices served ...	...	68
(20) " " " premises disinfected on removal of cases of infectious disease ...	...	143
(21) Number of schools disinfected ...	...	16

FOOD.

Slaughterhouses and Meat.

There are 36 private slaughterhouses in use in the district, 26 of which are " Registered " and 10 of which are Licensed. As these are scattered throughout the district it can be well understood what great difficulty is experienced, not only in ensuring that the sanitary authority's Bye-laws are complied with, but in making a proper and systematic inspection of car-

cases, which alone can guarantee to the consumer a good and wholesome meat supply.

Since the Public Health (Meat) Regulations, 1924, and the Tuberculosis Order of 1925 (No. 2), a great deal of time has been spent by your officers in visiting various slaughterhouses for the purpose of inspecting meat, so much so that various other duties have had to suffer, and if the construction of a public abattoir is out of the question at the moment it is at least desirable that the granting of further slaughterhouse licences should be discouraged.

Number of carcases found to be unfit for human food	Cows	Calves	Pigs	Sheep
--	------	--------	------	-------

Number of carcases notified under Tuberculosis Order, 1925 (No. 2)—38.	Number of carcases condemned and destroyed under Tuberculosis Order, 1925 (No. 2)—33.
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Milk.

The district is adequately supplied with milk produced locally, and although most of the cowsheds are now kept in a more cleanly state, many are in a very insanitary condition, the chief defects being inadequate lighting and ventilation, defective floor paving, and the prevalence of low lofts over the cowsheds. In the production of milk there is still room for improvement, in many cases the cattle are seldom groomed, nor are the milkers particular about the condition of their hands while milking, and as the cleanliness or otherwise of the methods adopted in the production and handling of the milk have probably more effect on its purity than have the premises in which it is produced, this too is a matter that is having the serious attention of your officers.

Bread.

There are very few bakehouses in use in the district, as many dealers in bread who previously baked it on their own premises now obtain it for retailing from large bakeries outside the district. Those bakehouses that are still in use are for the most part small and employ only a very few "hands." They are kept fairly clean, though hardly modern in type, and one or two are structurally poor. Here there is room for improvement in the means adopted in the distribution of bread. It is no unusual sight to see loaves being thrown from hand to hand in their naked state, so becoming very unclean, whereas by adopting the modern method of "wrapping" a much cleaner food would be supplied to the consumer.

MATERNITY AND CHILD WELFARE.

The table given on the centre pages is compiled from figures supplied by the various health visitors of the district, and gives

some indication of the vast amount of work they do in connection with this important branch of preventive medicine.

Although the local sanitary authority is not responsible for this work it may interest the individual members to know that a very successful Welfare Centre is held in the Wesleyan Schoolrooms, Cheadle, every Wednesday after noon. This centre was opened about 11 years ago and was organised and controlled by a committee of local ladies, most of whom still take an interest in it, and act as "voluntary workers." Now the County Council is responsible for the work done there, having taken it over some four years ago, and it is shortly their intention to hold at the same premises an antenatal clinic at which expectant mothers will be able to obtain advice calculated to benefit their health and that of the unborn babe.

ISOLATION HOSPITAL.

The Isolation Hospital stands in its own grounds—2 acres—and is situated at Moss Lane, about one mile from the town of Cheadle. Accommodation is provided for patients suffering from Scarlet Fever and from Diphtheria, though it has been found possible to treat cases of other infectious disease, such as Encephalitis Lethargica, Cerebro-spinal Meningitis and Typhoid there when occasion has arisen.

Since the Hospital was built in May, 1904, a total of 2027 cases of infectious disease have been treated there.

During the year 1925 there were admitted to hospital 137 cases of infectious disease, including 93 cases of Scarlet Fever and 44 cases of Diphtheria, the number of these cases in hospital at the end of the year being 19 and 3 respectively.

It will be seen from figures given elsewhere that much greater use is now being made of the facilities offered for both isolation and treatment of these two diseases at the hospital, and as the accommodation there has at times been taxed to its utmost the Council's attention is again drawn to the desirability of providing a bathing room for the observation block, which could then be used for observation of cases, and as a ward in time of need.

Age-incidence of Patients admitted to Hospital during 1925.

Age		Scarlet Fever	Diphtheria
Under 5 years of age	...	12	8
5 years and under 10	..	39	7
10 years and under 15	...	19	11
15 years and under 20	...	10	4
20 years and over	...	13	14

**Table showing the cases treated in Hospital
during the preceding 5 years.**

		1920	1921	1922	1923	1924	1925
Scarlet Fever	...	94	171	70	49	54	93
Diphtheria	...	50	31	14	39	39	44
Typhoid Fever	...	1	5	—	—	—	—
Encephalitis Lethargica	...	—	1	—	—	2	—
Total	...	145	208	84	88	95	137

SICKNESS AND INVALIDITY.

**Table showing distribution of Infectious Disease
throughout the District.**

Registration Districts	Scarlet Fever	Diphtheria	Tuberculosis	Pneumonia	Ophthalmia Neonatorum	Puerperal Fever	Malaria	Encephalitis Lethargica	Dysentery	Erysipelas	Meningitis	Enteric	Memb. Croup	Acute	Poliomyelitis	Total
Cheadle	28	19	17	23		1		1	2	4					1	97
Dilhorne	16	3	9	3						1	1					34
Ipstones	42	11	15	20	3		5	1	8	13		1				119
Alton	16	6	7	8						2						39

The causes of sickness and invalidity that have been most noteworthy in the district are Influenza and its complications, Pneumonia, Tuberculosis. Scarlet Fever, Diphtheria, Measles, Whooping Cough, Chickenpox and Mumps.

Influenza has been prevalent throughout the whole period and although much milder in type than that of the great pandemic of 1918-19 has been a cause of much sickness and invalidity. Most cases of this disease are treated in their own homes, but the local authority issue pamphlets indicating simple measures that should be taken to prevent and combat this treacherous disease. Pneumonia—still a very fatal disease—and Tuberculosis were also a source of serious illness. The latter does not appear to be diminishing to any great extent in this district, though this may in part be due to improved clinical and X-Ray methods used in the detection of this disease, which can now be diagnosed in a much earlier stage than formerly.

Its early detection and treatment enable many affected persons to be restored to normal health and should eventually lead to a much lessened incidence of this Disease.

Tuberculosis.

Age Periods	New Cases—48				Deaths—18			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	—	—	—	—	—	1	—
5	1	1	3	1	—	—	1	—
10	1	2	3	1	—	—	—	—
15	2	1	—	1	—	1	—	1
20	5	3	—	—	—	—	—	—
25	3	2	—	1	3	2	—	—
35	5	3	1	—	1	—	—	—
45	1	1	—	—	2	1	1	—
55	2	2	—	—	—	1	—	—
65 and upwards	2	—	—	—	3	—	—	—

Scarlet Fever causes much invalidity each year and is practically endemic in this district. It is however now a comparatively mild form of infectious disease and it is in great part to its mildness that its prevalence is due. Many mild cases have been detected only after careful investigation, and unfortunately after a considerable amount of infection has been disseminated.

Diphtheria, too, appears to be taking a milder form, although still rather prevalent in the district. There are, however, now many cases of this disease notified which in former years would not have been regarded as diphtheria (that is, persons harbouring diphtheria bacilli in their throats though not showing any definite clinical signs of this disease). This is owing to the difficulty in differentiating virulent from avirulent types of the microbe, and although it causes an apparent increase in the incidence of the disease, it has the great advantage that it enables suspects to be isolated and if necessary treated at an early stage.

Much sickness was caused amongst infants and school children by measles, an epidemic of which spread practically throughout the whole district during the early part of the year. This was followed by an epidemic of whooping-cough, which was also very prevalent and caused much sickness amongst young children. Both these diseases are very infectious and are very difficult to check, owing to their infectivity during the incubation stage and before they can be diagnosed, but if parents and guardians would take a more serious view of them much could be done by early isolation to prevent the outbreaks from becoming so widespread.

Chickenpox and mumps have also been a source of invalidity amongst children in certain parts of the district, whilst a few sporadic cases of Encephalitis Lethargica have been notified. There have also been notified from Cheddleton Mental Hospital a few cases of Dysentery—not uncommon in these institutions—and a few cases of Malaria, the latter having been caused by inoculation. During the period under review there have been no outbreaks of very fatal infectious disease, but much time is lost to school children by these various infections. It is satisfactory to note that there have been very few cases of epidemic diarrhoea amongst children during the period under review, probably due to the much greater care that is taken in the house to prevent milk being contaminated and to the habit, so common in many families, of boiling milk before using it as a food for infants.

The few cases of Ophthalmia Neonatorum that have been notified have been for the most part treated at home, and this successfully as in no instance does there appear to have been any impairment of vision.

Ophthalmia Neonatorum.

Cases		Vision unimpaired	Vision impaired	Total Blindness	Deaths
Notified	Treated At home	In hosp'1			
3	3	—	3	—	—

Prevalence of and Control over Infectious Diseases.

Disease			Total Cases Notified	Cases admitted to Hospital	Total Deaths
Smallpox	...	...	...	nil	nil
Scarlet Fever	...	...	102	93	1
Diphtheria	...	...	39	44*	1
Enteric Fever	...	...	1	nil	nil
Puerperal Fever	...	...	2	nil	1
Pneumonia	...	...	55	nil	25
Dysentery	...	...	16	nil	2
Ophthalmia Neonatorum	...	...	3	nil	nil
Erysipelas	...	...	20	nil	nil
Encephalitis Lethargica	...	...	2	nil	1
Malaria	...	...	5	nil	nil
Poliomyelitis	...	...	1	nil	nil
Cerebro-Spinal Meningitis	...	..	1	nil	1

*6 of the cases admitted to hospital proved not to be suffering from Diphtheria.

The County Council has made arrangements for practitioners to have bacteriological examinations made at the County Laboratory, Wissage, Lichfield (recently transferred from Wolverhampton) in suspected cases of Diphtheria, Enteric Fever, Tuberculosis, Cerebro-spinal Fever, Malaria, etc, while facilities are also given for having Masserman reactions tested.

Diphtheria Antitoxin and Influenza Vaccine can be obtained by practitioners on application to the local Medical Officer of Health, and although the latter is not in great demand, much use is made of the facilities given for the early antitoxin treatment of Diphtheria.

During the year the number of bacteriological examinations made at the County Laboratory for this district was 454 for Diphtheria and 36 for Tuberculosis, figures which show to what a large extent laboratory methods are made use of in the detection of these diseases,

Neither the Schick nor Dick tests have been made use of in this district, but when outbreaks of Diphtheria or Scarlet Fever occur amongst school children—and it is chiefly amongst them that these diseases are found—the schools are visited, all contacts are inspected and when considered necessary excluded from school for further observation. It is only when the outbreak points definitely to the disease being contracted at school that the schools are closed, and this chiefly in order that they may be thoroughly cleansed and disinfected. The disinfection of the schools is carried out by officers of the Sanitary Authority, who also take the responsibility of disinfecting private houses after removal of infectious persons to hospital or after their convalescence from infectious disease. There is no steam disinfecter in use in the district other than that at the Isolation Hospital, and it is customary for disinfection to be carried out by means of formalin spraying and fumigation, methods which appear to give fairly satisfactory results.

Summary of Nursing Arrangements, Hospitals and other Institutions available for the District.

General nursing in the home is carried out by the nurses of the District Nursing Associations, of which there are ten in Cheadle Rural District. These associations co-operate with the Staffordshire Nursing Association, with which they are affiliated, and none of them is under the control of the local sanitary authority.

Funds are chiefly derived from voluntary subscriptions, donations and membership subscriptions, and in those areas where the association nurses do school work, health visiting, etc., from

grants made by the County Council.

With the exception of measles—for which the County Council have arranged to give nursing assistance to necessitous cases during epidemics—no special arrangements have been made for nursing infectious cases in the home.

Midwifery practice is carried out to a large extent by Midwives, of whom there are 21 trained and 7 untrained practising in the district. None of them is subsidised by the local authority.

An Infant Welfare Centre and a School Clinic are open at Cheadle each Wednesday, both being under the control of the County Council.

No special provision is made for the treatment of Venereal disease locally, but arrangements have been made whereby infected persons can receive treatment at the North Staffs. Royal Infirmary, Stoke-on-Trent.

A Tuberculosis dispensary is open weekly—on Thursdays—at Cumberland House, Cheadle, and is attended by a Tuberculosis officer appointed by the Joint Tuberculosis Committee.

Hospitals provided or subsidised by the Local Authority or by the County Council.

The Cheadle District Infectious Diseases Hospital is provided by the Local Authority and has accommodation for the treatment of Scarlet Fever, Diphtheria and Enteric Fever.

The Staffordshire Joint Smallpox Hospital, at Bagnall, is in part maintained by the local authority, who have a representative on its committee.

The County Mental Hospital at Cheddleton is the only large hospital in the district. It is controlled by a joint committee and is subsidised to some extent by the local authority.

Outside the district, but receiving patients from the district, are The North Staffs. Royal Infirmary, Stoke-on-Trent; Longton Cottage Hospital, Longton; Longfields Cripples' Home, Stoke-on-Trent. These are all voluntary hospitals, over none of which has the local authority any control, but to two of them annual subscriptions are made.

The Staffordshire, Wolverhampton and Dudley Joint Tuberculosis Committee have provided Sanatoria for the treatment of persons suffering from tuberculosis at Moxley (for males), Grounslow (for females), Yarnfields (for females) and Himley (for children).

Provision is made for the care of prospective unmarried mothers, on payment of 40/- per week, at the Mrs. Legge Memorial Home, Wolverhampton.

Homeless children are provided for at Cheadle Cottage Homes, and to some extent at Cheadle Union Infirmary.

The local authority has quite recently provided an ambulance for the use of persons suffering from other than infectious diseases. This ambulance is already in considerable demand and is greatly appreciated.

